

Why a TSE Program?

The 2014 Idaho Legislature approved and funded a plan to develop a statewide Time Sensitive Emergency system of care that includes three of the top five causes of deaths in Idaho: trauma, stroke and heart attack. Studies show that organized systems of care improve patient outcomes, reduce the frequency of preventable death and improve the quality of life of the patient.

In 2012, 49.1% of preventable deaths in Idahoans under age 75 were the result of trauma, stroke or heart

Criteria for becoming a designated Trauma, Stroke or Heart Attack (STEMI) Center can be found in the Standards Manual (available online at <http://tse.idaho.gov/TSE>).

The TSE system is voluntary and no hospital will be required to participate.



Time Sensitive Emergency

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Time



Sensitive



Emergency



**Your guide to
understanding
Idaho's new
Time Sensitive
Emergency
System**

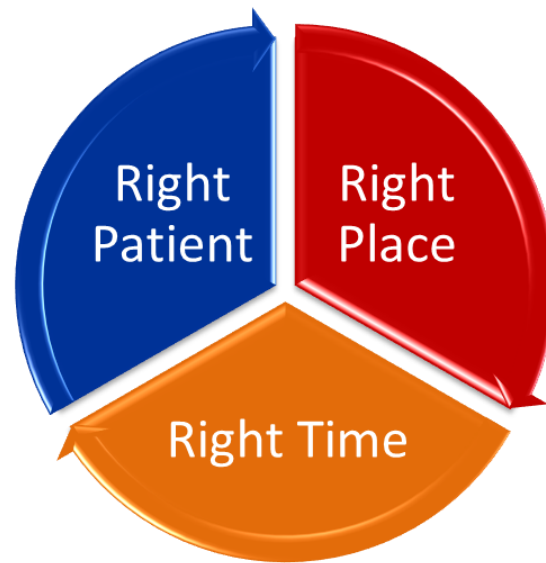


How the TSE Works

The Idaho Department of Health and Welfare provides oversight and support for the day-to-day operation of the program.

A governor-appointed TSE Council, made up of providers, EMS agencies, and administrators of hospitals representing both urban and rural populations, is responsible for establishing Rules and Standards for the TSE system. The Council is the statewide governing authority of the system.

The state has been divided into six regions. Each of these has a Regional TSE Committee, made up of EMS providers, hospital providers and administrators, and public health agencies. The regional committees will be the venue in which a wide variety of work is conducted such as education, technical assistance, coordination, and quality improvement. The Regional TSE Committees will have the ability to establish guidelines that best serve the uniqueness of their specific community, as well as providing a feedback loop for EMS and hospital providers.



The following guiding principles are the foundation for the TSE system:

- Apply nationally accepted evidence-based practices to time sensitive emergencies;
- Ensure that standards are adaptable to all providers wishing to participate;
- Ensure that designated facilities institute a practiced, systematic approach to time sensitive emergencies;
- Reduce morbidity and mortality from time sensitive emergencies;
- Design an inclusive system for time sensitive emergencies;
- Participation is voluntary; and
- Data are collected and analyzed to measure the effectiveness of the system.

Benefits of the TSE System

Montana established a state-wide voluntary trauma system in 2006. To date, they are nearing 80% facility participation. From 2005 to 2012, Montana reduced their death rate per 100,000 from 55.3 to 54.3. If Idaho had reduced our trauma death rate by the same amount in the same amount of time, **47 lives could have been saved** in Idaho in 2012.

Utah established a state-wide STEMI system in 2009. If Idaho had matched Utah's death rate due to heart attack in 2012, **184 Idahoans might have survived their heart attacks.**

Washington state established a state-wide stroke system in 2010. If Idaho had reduced their deaths caused by stroke at the same rate as Washington in the same amount of time, **13 lives could have been saved** in Idaho 2012.

The TSE system could potentially save 244 lives annually in Idaho.